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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

2267.006

First Named Inventor

Laibin Luo

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PROCESS FOR THE PREPARATION OF AMPHIPHILIC POLY(N-VINYL-2-PYRROLIDONE)
BLOCK COPOLYMERS**

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <input type="text" value="21917"/>				OR <input type="checkbox"/> Correspondence address below	
Name McHale & Slavin, P.A.					
Address 2855 PGA Boulevard					
City Palm Beach Gardens			State FL		ZIP 33410
Country USA		Telephone (561) 625-6575		Fax (561) 625-6572	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Laibin				Family Name or Surname Luo	
Inventor's Signature					Date
Residence: City Pierrefonds		State Quebec		Country Canada	
				Citizenship Chinese	
Mailing Address 18118 Rue de Cabourg					
City Pierrefonds		State Quebec		ZIP H9K 1R7	Country Canada
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David				Family Name or Surname Lessard	
Inventor's Signature					Date
Residence: City Montreal		State Quebec		Country Canada	
				Citizenship Canadian	
Mailing Address 11970 St-Germain					
City Montreal		State Quebec		ZIP H4J 2A2	Country Canada
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <div style="float: right; text-align: right;"> Page 1 of 3 </div>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Sandra		Gori	
Inventor's Signature		Date	
Residence: City Montreal	State Quebec	Country Canada	Citizenship French
Mailing Address 80 rue Jarry Est			
Mailing Address			
City Montreal	State Quebec	Zip H2P 1T1	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Maxime		Ranger	
Inventor's Signature		Date	
Residence: City Montreal	State Quebec	Country Canada	Canadian Citizenship
Mailing Address 4805 Chabot, App. 3			
Mailing Address			
City Montreal	State Quebec	Zip H2H 1Y4	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Yuan		Wang	
Inventor's Signature		Date	
Residence: City Brossard	State Quebec	Country Canada	Canadian Citizenship
Mailing Address 9455 Radisson Avenue			
Mailing Address			
City Brossard	State Quebec	Zip J4X 2P6	Country Canada

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <div style="float: right; text-align: right;"> 2 3 Page ____ of ____ </div>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Julie		Lafreniere	
Inventor's Signature		Date	
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Mailing Address			
City Saint-Bruno	State Quebec	Zip J3V 5N8	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean-Francois		Meunier	
Inventor's Signature		Date	
Residence: City Montreal	State Quebec	Country Canada	Citizenship Canadian
Mailing Address 7657 rue d'Iberville			
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City Montreal	State Quebec	Zip H2E 2Z1	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Genevieve		Bibeau	
Inventor's Signature		Date	
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Mailing Address			
City Montreal	State Quebec	Zip H1B 2X4	Country Canada

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <div style="float: right; text-align: right;"> 3 3 Page of </div>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Frederic		Lebrun	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lu Wei		Liu	
Inventor's Signature		Date	
Residence: City Brossard	State Quebec	Country Canada	Citizenship Canadian
Mailing Address 9455 Radisson Avenue			
Mailing Address			
City Brossard	State Quebec	Zip J4X 2P6	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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